

CLAIMS ONLY							Application Number 10749770	Filing Date	
							Applicant(s)		
* May be used for additional claims or amendments									
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep
1	1						51		
2		1					52		
3			1				53		
4							54		
5							55		
6							56		
7							57		
8							58		
9							59		
10							60		
11							61		
12							62		
13							63		
14							64		
15							65		
16							66		
17	1						67		
18							68		
19							69		
20							70		
21		1					71		
22							72		
23	1						73		
24		1					74		
25			1				75		
26							76		
27							77		
28							78		
29							79		
30		1					80		
31							81		
32							82		
33		1					83		
34			1				84		
35							85		
36		1					86		
37			1				87		
38							88		
39							89		
40							90		
41							91		
42							92		
43							93		
44							94		
45							95		
46							96		
47							97		
48							98		
49							99		
50							100		
Total Indep	3						Total Indep		
Total Depend	35						Total Depend		
Total Claims	38						Total Claims		